## PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 29, 1999

Application or Docket Number

09489473

CLAIMS AS FILED - PART I							SMALL E	ENTITY		OTHER	THAN
			(Column 1).		(Column 2)		TYPE		OR	SMALL	ENTITY
FC	)R	NUM	BER FILED	NUMBER	EXTRA		RATE	FEE		RATE	FEE
ВА	SIC FEE					A.		345.00	OR		·690.00
ΤÇ	TAL CLAIMS	7	minus 2	20= * /	3		X\$ 9=		OR	X\$18=	534
INE	EPENDENT CL	AIMS	6 minus	3 = * 3	3		X39=		OR	X78=	234
MU	LTIPLE DEPEN		+130=		OR	+260=	· _ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~				
* if	the difference		TOTAL		OR	TOTAL	1158				
	CLAIMS AS AMENDED - PART II							•		OTHER	THAN
		(Column 1		(Column 2)	(Column 3)		SMALL E	ENTITY	OR	SMALL	NTITY
ENT A	A Wass	CLAIMS RÉMAINING AFTER AMENDMEN	All the sort	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	*	Minus	**	=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	*** PENDENT CLAIM	=		X39=		OR	X78=	
	FIRST PRESE	NTATION OF	MOLTIPLE DE	PENDENT CLAIM			+130=		OR	+260=	
						<b>L</b>	TOTAL		OR	TOTAL	
		(O - l		(O = k · · · · · · O)	(O = l O)	Αl	ODIT. FEE		10	ADDIT. FEE	
		(Column 1 CLAIMS	)	(Column 2) HIGHEST	(Column 3)			ADDI-	1		ADDI-
AMENDMENT B		REMAINING AFTER AMENDMEN		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE
	Total	*	Minus	**	=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	PENDENT CLAIM	=		X39=		OR	X78 <u>=</u>	
	TINOT PALOE	NIAHONO	MOETIFEE DEI	PENDENT CEAN			+130=		OR	+260=	
									OR	TOTAL ADDIT. FEE	
		(Column 1	)	(Column 2)	(Column 3)		DDIT. FEE		•		
ENTC		CLAIMS REMAINING AFTER AMENDMEN		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
<b>AMENDMENT</b>	Total	*	Minus	**	=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***	=		X39=		OR	X78=	
	FIRST PRESE	NIATION OF	MULTIPLE DE	PENDENT CLAIM	l	'   <del> </del>	+130=		OR	+260=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.											
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  TOTAL ADDIT. FEE  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											

## This Form is for INTERNAL PTO USE ONLY It does NOT get mailed to the applicant.

## NOTICE OF FILING / CLAIM FEE(S) DUE (CALCULATION SHEET)

APPLICATION NUMBER: 09489473

## Total Fee Calculation

rotal ree Calculation									
•	Fee Cade	Total ≅ Claims	Number Extra X	Fee	Fee -	Tutal			
•	Sa./Lg.			Sm. Entiry	Lg. Entiry				
Back Filing Fee	201/101	<b>A</b>			690.	690			
Total Claims >20	203/103	33	13 x		<u> 18</u> .	234			
Independent Claims >3	202/102	<u>(</u> .; -	<u>3</u> x		<u> 78</u> .	234			
Mult. Dep Claim Present	204/104								
Surcharge	205/105	•			<u> 130</u> .	<u> 130</u>			
English Translation	130								
TOTAL FEE CALCULA	TION			<i>,</i>	· .	1286			
Fees due upon filing th	ne application.								
Total Filing Fees Due	= <u>S</u>	1,286			:	·• .			
Less Filing Fees Subm	ined - S	ψ			,	•			
BALANCE DUE	7 = S	1,288			:	7			
Office of Initial Catent	Examination	<del></del>							
FORM OIPE-RAM-01 (Rev	~ . 12/97)	Ligo	ire 7		् ज	~			